

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	LLOYD F. AUDETTE	COURT CASE NUMBER	05-10403-DPW
DEFENDANT	KATHLEEN M. DENNEHY, COMMISSIONER OF CORRECTION	TYPE OF PROCESS	SUMMONS
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
→	KATHLEEN M. DENNEHY, COMMISSIONER OF CORRECTION		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
	50 Maple Street, Suite no. 3, Milford MA 01757-3698		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	ONE
LLOYD F. AUDETTE S.B.C.C./PO. BOX 8000 SHIRLEY MA, 01464	Number of parties to be served in this case	ONE
	Check for service on U.S.A.	U.S.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service*):

Fold
Serve Defendant's attorney who is
David J. Rentsch, Counsel
Dept. of Correction
70 Franklin Street, Suite 600
Boston MA 02110-1300
(617) 727-3300, ext. 142

2005 MAR 22 A 7:54
RECEIVED
MARSHAL SERVICE
BOSTON, MA
Fold

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<i>Lloyd F. Audette pro se</i>	<input type="checkbox"/> DEFENDANT	NONE	3-12-05

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only first USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk <i>Mary J. Jalavere</i>	Date <u>3/22/05</u>
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <i>Michelle Farrell</i>	A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)	Date of Service	Time	am
	<u>4/15/05</u>	<u>11:10</u>	<input checked="" type="checkbox"/>
	Signature of U.S. Marshal or Deputy <i>CR</i>		

Service Fee <u>67.50</u>	Total Mileage Charges <i>(including endeavors)</i> <u>24.09</u>	Forwarding Fee <u>—</u>	Total Charges <u>91.59</u>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:
1.5 hr

UNITED STATES DISTRICT COURT

District of MASSACHUSETTS

LLOYD F. AUDETTE,
Plaintiff
V.

SUMMONS IN A CIVIL CASE

UMASS CORRECTIONAL
HEALTH, ET AL.,
Defendants

CASE

C.A. 05-10403-DPW

TO: (Name and address of Defendant)

DEPARTMENT OF CORRECTION, KATHLEEN DENNEHY, COMMISSIONER

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)
LLOYD F. AUDETTE, PRO SE

* or answer as otherwise required by the Federal Rules of Civil Procedure.

an answer to the complaint which is herewith served upon you, 20* days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

SARAH ALLISON THORNTON

CLERK

(By) DEPUTY CLERK

3/7/05

DATE

